BEST AVAILABLE COPY

| | | | | | | | | Application or Docket Number | | | | | |
|---|--|---|--------------|--------------|------------------------------|------------------|-------|------------------------------|------------------------|----------------|---------------------------|------------------------|--|
| | PATENTA | PPLICATIO Effecti | RD | 10/003684 | | | | | | | | | |
| CLAIMS AS FILED - PART I (Column 1) (C | | | | | | (Column 2) | | SMALL ENTITY TYPE | | OR | OTHER THAN R SMALL ENTITY | | |
| TOTAL CLAIMS | | | 27 | | | | RA | TE | FEE | | RATE | FEE | |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | BASI | BASIC FEE 35 | | OR | BASIC FEE | 710.00 | |
| TOTAL CHARGEABLE CLAIMS | | | 27 minus 20= | | • | | X\$ | X\$ 9= | | OR | X\$18= | | |
| INDEPENDENT CLAIMS | | | 7 minus 3 = | | | | X40= | | | OR | X80= | | |
| MULTIPLE DEPENDENT CLAIM P | | | RESENT | | | | +135= | | | OR | +270= | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | TO | TOTAL | | OR | TOTAL | | | |
| Display CLAIMS AS AMENDED - PART II | | | | | | 014 | | ENTITY | OD. | OTHER SMALL | | | |
| | | | | | mn 2) | (Column 3) | SM | ALL | ENTITY | OR I I | SMALL | | |
| AMENDMENT A | | REMAINING AFTER AMENDMENT | | NUM | BER | PRESENT EXTRA | RA | TE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | . 14 | Minus | 2 | 7 | = / | X\$ | 9= | V | OR | X\$18= | 7 | |
| | Independent | . 4 | Minus | *** 6 | 7 | = / | X40 | 0= | 7 | OR | X80= | | |
| Ľ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | +13 | 35= | 7 | OR | +270= | | | |
| | | | | | | | ADDI | OTAL | C | | TOTAL ADDIT. FEE | | |
| | (Column 1) (Column 2) (Column 3) | | | | | | | | <u> </u> | • | A0011.1 EE | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | NUN PREVI | HEST MBER OUSLY FOR | PRESENT EXTRA | RA | TE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | • | Minus | •• | = | | X\$ | 9= | | OR | X\$18= | | |
| | Independent | • | Minus | ••• | | = | | X40= | | OR | X80 ≃ | | |
| | FIRST PRESE | NTATION OF MI | JUTIPLE DEP | ENDEN | CLAIM | | +1: | 35= | | OR | +270= | | |
| | | | | | | | ADDI | OTAL | | OR | TOTAL ADDIT, FEE | | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | | | | |
| AMENDMENT C | • | CLAIMS REMAINING AFTER AMENDMENT | | NUN PREVI | HEST MBER OUSLY FOR | PRESENT EXTRA | RA | TE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | • | Minus | •• | | = | X\$ | 9= | | OR | X\$18= | · | |
| | Independent | • | Minus | ••• | | = | X4 | 0= | - | OR | X80= | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | +13 | 35= | | OR | +270= | | |
| "If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | | |